

OFFICE OF DIVERSION AND REENTRY



Health Services

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Office of Diversion & Reentry

On May 6, 2014, the Los Angeles County Board of Supervisors adopted a motion directing several departments, under the leadership of **Jackie Lacey, District Attorney**, to move toward establishing a comprehensive diversion program for the County. Ms. Lacey has since led that charge through the **Criminal Justice Mental Health Advisory Board**.

Crime & Justice

LA District Attorney releases roadmap for diverting mentally ill from jail

Rina Peltz

July 22 2015

L.A. District Attorney Jackie Lacey has made diverting mentally ill from jails a key priority. BENJAMIN BRAYFIELD/KPCC.



After a year and a half of research, a task force led by L.A. District Attorney Jackie Lacey is [releasing a roadmap for reducing L.A.'s ever-growing number of mentally ill jail inmates](#), and diverting those who need it into treatment.

MENTAL HEALTH ADVISORY BOARD REPORT A BLUEPRINT FOR CHANGE



JACKIE LACEY
District Attorney

August 4, 2015



**STATEMENT OF PROCEEDINGS FOR THE
REGULAR MEETING OF THE BOARD OF SUPERVISORS
OF THE COUNTY OF LOS ANGELES HELD IN ROOM 381B
OF THE KENNETH HAHN HALL OF ADMINISTRATION
500 WEST TEMPLE STREET, LOS ANGELES, CALIFORNIA 90012**

Tuesday, August 11, 2015

9:30 AM

49-C. Recommendation as submitted by Supervisors Ridley-Thomas and Kuehl:
Take the following actions:

1. Improve coordination and implementation of diversion efforts throughout Los Angeles County by executing the following:
 - a. Establish a Director of the Office of Diversion position within the Department of Health Services who would be responsible for oversight and coordination of all County-wide diversion of persons who have mental illness or substance abuse issues, and persons who are homeless or at risk of becoming homeless upon discharge, with this position to coordinate closely with the Jail Care Transitions Director;
 - b. Allocate five new positions to the Office of Diversion, which shall include expertise in housing, health, mental health/alcohol and drug prevention and legal/justice issues;

40% for housing

“Housing funds shall be allocated for rapid re-housing, permanent supportive housing, higher levels of care including board and care facilities and with provisions within each allocation for crisis housing pending placement.”

“Housing shall include related integrated supportive services, such as case-management, mental health treatment, substance abuse treatment, job training and connections to community-based services.”



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ODR's key partners



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Community
Partners



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Harm Reduction

Harm reduction is a set of practical strategies and ideas aimed at **reducing negative consequences associated with drug use.**

As opposed to reducing drug use, the focus is on reducing the harms of drug use.

However, **abstinence and harm reduction are not contradictory or mutually exclusive.**

Services first model – using services as tools of engagement, uses engagement to draw people in.



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Housing First

Prioritizes providing people experiencing homelessness with **permanent housing** as quickly as possible

Then, provides voluntary supportive services as needed

Prioritizes client choice in both housing selection and in service participation.

Study after study has shown that Housing First **yields higher housing retention rates**, reduces the use of crisis services and institutions, and improves people's health and social outcomes.



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Flexible Housing Subsidy Pool

- **Launched:** January 2014 by DHS Housing for Health
- **Mission:** Quickly and effectively house homeless
- **Initial Funding:** \$18 million
(w/ \$4 million from Conrad N. Hilton Foundation)
- **Housing Types:** Supportive, Affordable, Private Market
- **Operator:** Brilliant Corners



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Intensive Case Management Services (ICMS)

- Every client connected to services.
- Individualized service planning and linkages to health, mental health, and substance use disorder treatment.
- Help clients retain housing and reach health and wellbeing.
- Services provided by on-site staff or mobile teams.



Los Angeles Department of Health Services major centers:

- Harbor-UCLA Medical Center 570
- LAC+USC Medical Center 600
- Olive View-UCLA Medical Center 377
- The Los Angeles County Jail 16,621 (5,134)



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SPECIAL REPORT

An estimate of persons in the jail mental health population likely to be appropriate for safe release into community services

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Kristen Ochoa, MD, MPH
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Dustin Stephens, MD, PhD

Introduction

On 8/14/2018, The Los Angeles County Board of Supervisors passed a motion, Scaling up Diversion and Reentry Efforts for People with Serious Clinical Needs, which directed the Department of Health Services to work with appropriate partners to conduct a study of the existing County jail population to identify who would likely be eligible for diversion and reentry programs based on their clinical conditions and current criminal charges. The study's intent is to inform plans and discussions regarding the amount of community-based service capacity that would need to be built to adequately serve this population. That study is currently being conducted by a team of researchers from the RAND Corporation, Groundswell Services, Inc., UCLA School of Law, and UC Irvine. In advance of that study, and to inform accelerated efforts underway in Los Angeles County to address the needs of persons with mental disorders inside the jail, the Office of Diversion and Reentry (ODR) conducted this preliminary study to estimate the proportion of the jail mental health population that could be safely removed from the jail into community-based services, without consideration of the current supply of such services. Determinations were made after



More than half of the jail mental health population is estimated to be appropriate for safe release into community-based services, if sufficient numbers of those services were available.

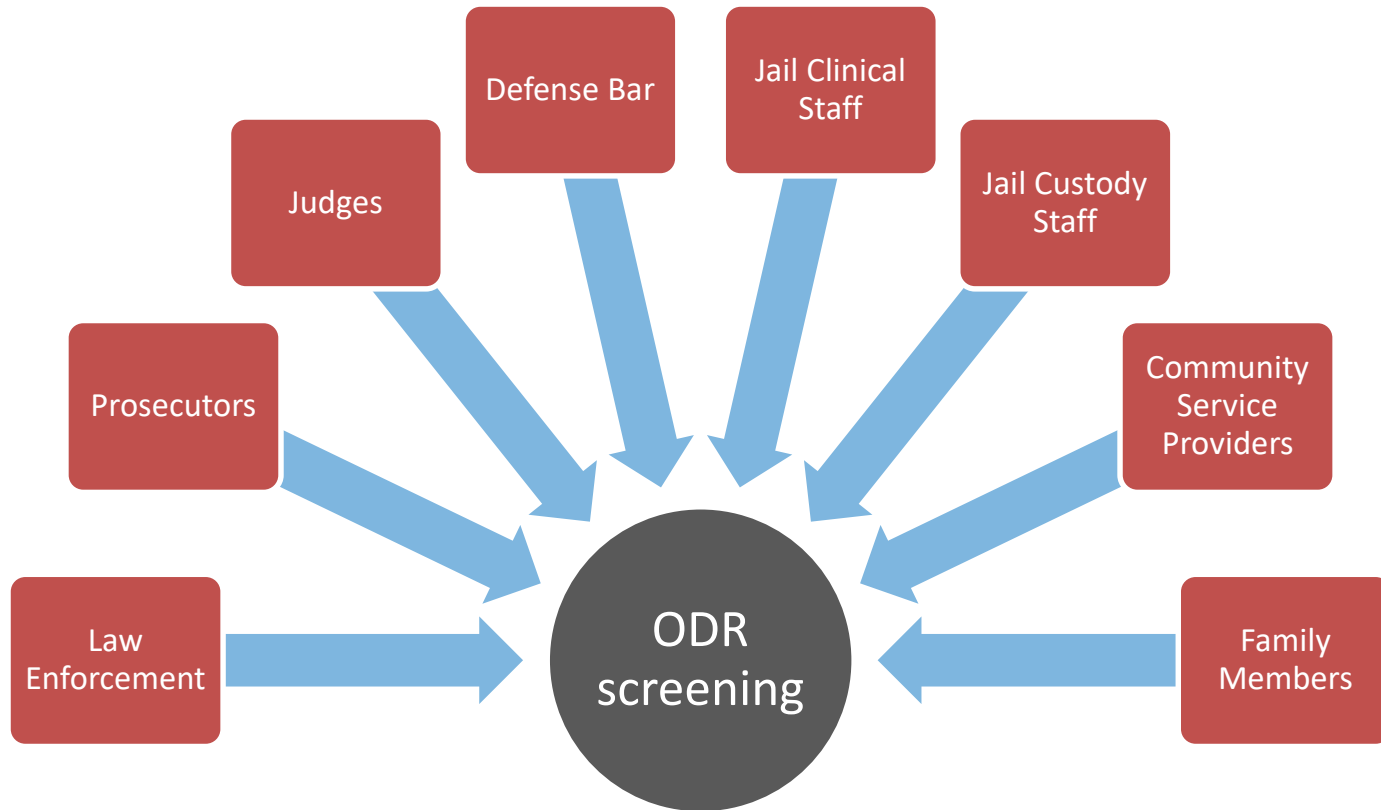
Appropriateness for safe release to community-based services in a random sample of jail inmates receiving Jail Mental Health services
(n=500)

Potential for Safe Release to Community-Based Services	n (%)	Margin of Error (95% confidence interval)
Appropriate (yes)	281 (56%)	52–61%
Potentially appropriate (<i>maybe</i>)	34 (7%)	5–9%
Not appropriate (<i>no</i>)	185 (37%)	33–41%



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ODR referral sources



Flexible and nimble referral process



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ODR Housing

- Began August 2016
- Permanent supportive housing, intensive case management, formal probation

Persons currently active: **1,036**

Persons in permanent supportive housing: **437**

Total
Released:
1,742



MIST-CBR

- Began October 2015
- Misdemeanor Incompetent to Stand Trial Community-Based Restoration

Persons being restored in community on active court order: **250**

Total
Released:
1,275



FIST-CBR & Off-Ramp

- Began July 2018
- Felony Incompetent to Stand Trial Community-Based Restoration
- Off-Ramp, competency findings & services under PC 1370 (a)(1)(g)

Persons being restored in community on active court order : **114**

Persons found competent while in jail, avoiding State Hospital : **100**

Total
Released:
139



Maternal Health

- Began March 2018
- Diversion of pregnant women from custody

Persons currently active: **65**

Total
Released:
73



DSH Diversion

- Began March 2019
- Specialized use of PC 1001.36

Persons currently referred: **84**

Total
Released:
15

Grand Total
Released from Jail
into Community
Services:
3,244

ODR Housing

- A permanent supportive housing and treatment program that serves individuals who are in custody in the Los Angeles County Jail, are homeless, and have a serious mental disorder.
- Clients are connected to intensive case management services, interim housing upon release and continue on to permanent supportive housing.



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MIST-Community Based Restoration

- The **Misdemeanor Incompetent to Stand Trial-Community Based Restoration (MIST-CBR)** program diverts individuals facing misdemeanor charges who are found incompetent to stand trial into community based settings to be restored to competency.
- Patients are removed from jail and court-ordered to community based treatment including community outpatient, inpatient, and supportive housing programs.



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FIST-Community Based Restoration

- The **Felony Incompetent to Stand Trial-Community Based Restoration (FIST-CBR)** program diverts individuals facing felony charges who are found incompetent to stand trial into community based settings to be restored to competency.
- FIST-CBR is a collaboration with the Department of State Hospitals to reduce the wait list and wait time of those waiting in jail for State Hospital placement.
- As part of this project, ODR utilizes PC 1370 (a)(1)(G) which allows those who have become competent in jail to be adjudicated and diverted into community housing and care.



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Maternal Health Program

- Under the directive of the LA County Board of Supervisors, ODR reviews the cases of all pregnant women in custody and intervenes on the majority in order to gain a release to the community with supportive services and housing provided by ODR.
- A majority of these pregnant women reside in specialized interim housing settings that allow women to remain with their children until they can move into permanent supportive housing.



DSH Diversion

- Specialized use of PC 1001.36
- Funded by the Department of State Hospitals to support the diversion of clients with serious mental illnesses who have the potential to be deemed incompetent to stand trial on felony charges
- Based out of criminal court in LA's busiest courthouse (Central District)
- ODR provides: Supportive housing, intensive case management, clinical services
- Probation Department provides: Pre-trial supervision



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CRIMINAL
COURTS

Thank you



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